

MAR 05 2012



February 23, 2012

TN Department of Environment and Conservation  
Cookeville Environmental Field Office  
Attn: WPC, Permit Section Manager  
1221 South Willow Avenue  
Cookeville, Tennessee 38506

To Whom it May Concern:

**Re: Application for a State Operating Permit  
Center Hill Main Dam Foundation Remediation Project  
DeKalb County, Tennessee**

Bauer Foundation Corp. is submitting the enclosed Application for a State Operating Permit for the collection and offsite disposal of domestic sanitary waste water that will be generated during a construction project located at the Center Hill Dam in DeKalb County, Tennessee. The location of the construction project site and the one-mile radius from the project site boundary are shown in Fig. 1 (attached).

The U.S. Army Corps of Engineers (USACE) has contracted with Bauer Foundation Corp. to perform foundation remediation activities at the Center Hill Main Dam. Construction is expected to begin February 29, 2012 and be completed by June 30, 2014. Domestic sanitary facilities will be required for the duration of the project.

Bauer will establish several construction trailers and sanitary facilities at the project site. Domestic sanitary waste water will be collected in holding tanks and hauled offsite by a licensed septic waste hauler, Cathey's Portable Toilets and Septic Pumping, to the City of McMinnville Waste Water Treatment Facility. Copies of Cathey's Portable Toilets and Septic Pumping Permit to Operate and Authorization to Discharge Under the Sewer Use Ordinance, City of McMinnville, are attached. Also attached is the agreement between Cathey's Portable Toilets and Septic Pumping and Bauer.

Please call me at 727-531-2577 if you have any questions.

Sincerely,

BAUER FOUNDATION CORP.

A handwritten signature in blue ink, appearing to read 'CP', is written over the printed name of Charles Puccini.

Charles Puccini  
President

CP/rr  
Attachment



Tennessee Department of Environment and Conservation  
Division of Water Pollution Control  
401 Church Street, 6<sup>th</sup> Floor L & C Annex  
Nashville, TN 37243-1534  
(615) 532-0625

**APPLICATION FOR A STATE OPERATION PERMIT (SOP)**

Type of application: ☒ New Permit ☐ Permit Reissuance ☐ Permit Modification

**Permittee Identification:** (Name of city, town, industry, corporation, individual, etc., applying, according to the provisions of Tennessee Code Annotated Section 69-3-108 and Regulations of the Tennessee Water Quality Control Board.)

Permittee

Name **Bauer Foundation Corp.**  
(applicant):

Permittee **13203 Byrd Legg Drive**  
Address: **Odessa, FL 33556**

Official Contact:

**Peter Banzhaf**

Title or Position:

**Technical Project Manager**

Mailing Address:

**1075 Wolfe Creek Road**

City:

**Silver Point**

State:

**TN**

Zip:

**38582**

Phone number(s):

**727-744-2623**

E-mail:

**Peter.Banzhaf@bauer.de**

Optional Contact:

**Rick Adkisson**

Title or Position:

**Administrative Project Manager**

Address:

**1075 Wolfe Creek Road**

City:

**Silver Point**

State:

**TN**

Zip:

**38582**

Phone number(s):

**813-363-0744**

E-mail:

**radkisson@bauerfoundations.com**

**Application Certification** (must be signed in accordance with the requirements of Rule 1200-4-5-.05)

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Name and title; print or type

**Charles Puccini, President  
Bauer Foundation, Corp.**

Signature

Date

**29 FEB 2012**

<b>Facility Identification:</b>		<b>Existing Permit No.</b>	
Facility Name:	<b>Center Hill Main Dam Construction Site</b>	County:	<b>DeKalb</b>
Facility Address or Location:	<b>Intersection of Highways 96 and 141 Lancaster, TN</b>	Latitude:	<b>36.09</b>
		Longitude:	<b>-85.82</b>
Name and distance to nearest receiving waters: <b>Center Hill Lake (adjacent) and Caney Fork River (1,500 ft)</b>			
If any other State or Federal Water/Wastewater Permits have been obtained for this site, list their permit numbers: <b>Ready Mix Concrete Facility Permit TNG110362</b> <b>Construction General Permit TNR100000 (Coverage to be obtained)</b>			
Name of company or governmental entity that will operate the permitted system: <b>Bauer Foundation Corp.</b>			
Operator address: <b>13203 Byrd Legg Drive, Odessa, FL 33556</b>			
Has the owner/operator filed for a Certificate of Convenience & Necessity (CCN), or an amended CCN, with the Tennessee Regulatory Authority (TRA) (may be required for collection systems and land application treatment systems)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A			
If the applicant listed above does not yet own the facility/site or if the applicant will not be the operator, explain how and when the ownership will be transferred or describe the contractual arrangement and renewal terms of the contract for operations.			
<b>Complete the following information explaining the entity type, number of design units, and daily design wastewater flow:</b>			
<u>Entity Type</u>	<u>Number of Design Units</u>		<u>Flow (gpd)</u>
<input type="checkbox"/> City, town or county	No. of connections:		
<input type="checkbox"/> Subdivision	No. of homes:	Avg. No. bedrooms per home:	
<input type="checkbox"/> School	No. of students:	Size of cafeteria(s): No. of showers:	
<input type="checkbox"/> Apartment	No. of units:	No. units with Washer/Dryer hookups:  No. units without W/D hookups:	
<input type="checkbox"/> Commercial Business	No. of employees:	Type of business:	
<input type="checkbox"/> Industry	No. of employees:	Product(s) manufactured:	
<input type="checkbox"/> Resort	No. of units:		
<input type="checkbox"/> Camp	No. of hookups:		
<input type="checkbox"/> RV Park	No. of hookups:	No. of dump stations:	
<input type="checkbox"/> Car Wash	No. of bays:		
<input type="checkbox"/> Other			
Describe the type and frequency of activities that result in wastewater generation. <b>Domestic sanitary waste water generated at a construction site. Sanitary waste water will be collected in holding tanks and hauled offsite as needed by a licensed septic hauler to a municipal waste water treatment facility.</b>			

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<b>Engineering Report (required for collection systems and/or land application treatment systems):</b>	<input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Prepared in accordance with Rule 1200-4-2-.03 and Section 1.2 of the Tennessee Design Criteria (see website for more information) <input type="checkbox"/> Attached, or <input type="checkbox"/> Previously submitted and entitled: _____ Approved? <input type="checkbox"/> Yes. Date: _____ No	

<b>Engineering Report (required for collection systems and/or land application treatment systems):</b>	N/A
Prepared in accordance with Rule 1200-4-2-.03 and Section 1.2 of the Tennessee Design Criteria (see website for more information) Attached, or Previously submitted and entitled: _____ Approved? Yes. Date: _____ No	

<b>Wastewater Collection System:</b>	N/A
System type (i.e., gravity, low pressure, vacuum, combination, etc.):	
System Description:	
Describe methods to prevent and respond to any bypass of treatment or discharges (i.e., power failures, equipment failures, heavy rains, etc.):	
In the event of a system failure describe means of operator notification:	
List the <b>emergency</b> contact(s) (name/phone): _____	
For low-pressure systems, who is responsible for maintenance of STEP/STEG tanks and pumps or grinder pumps (list all contact information)?	
Approximate length of sewer (excluding private service lateral):	
Number/hp of lift stations: _____ /	Number/hp of lift pumps _____ /
Number/volume of low pressure and or grinder pump tanks _____ /	
Number/volume septic tanks _____ /	
Attach a schematic of the collection system. Attached	
If this is a satellite sewer and you are tying in to another sewer system complete the following section, listing tie-in points to the sewer system and their location (attach additional sheets as necessary):	
<u>Tie-in Point</u>	<u>Latitude (xx.xxxx°)</u>
	<u>Longitude (xx.xxxx°)</u>

<b>Land Application Treatment System:</b>	N/A
Type of Land Application Treatment System: Drip                      Spray _____ Other, explain:	
Type of treatment facility preceding land application (recirculating media filters, lagoons, other, etc.):	
Attach a treatment schematic. Attached	
Describe methods to prevent and respond to any bypass of treatment or discharges (i.e., power failures, equipment failures, heavy rains, etc.):	
For New or Modified Projects: Name of Developer for the project:	
Developer address and phone number:	
For land application, list: Proposed acreage involved:                      Inches/week gpd/sq.ft loading rate to be applied:	
Is wastewater disinfection proposed?	
Yes Describe land application area access:	
No Describe how access to the land application area will be restricted	
<b>Attach required additional Engineering Report Information (see website for more information)</b>	
Topographic map (1:24,000 scale presented at a six inch by six inch minimum size) showing the location of the project including quadrangle(s) name(s) GPS coordinates, and latitude and longitude in decimal degrees should also be included.	
Scaled layout of facility showing the following: lots, buildings, etc. being served, the wastewater collection system routes, the pretreatment system location, the proposed land application area(s), roads, property boundaries, and sensitive areas such as streams, lakes, springs, wells, wellhead protection areas, sinkholes and wetlands.	
Soils information for the proposed land disposal area in the form of a Water Pollution Control (WPC) Soils Map per Chapter 16 and 17 State of Tennessee Design Criteria for Sewage Work. The soils information should include soil depth (borings to a minimum of 4 feet or refusal) and soil profile description for each soil mapped.	
Topographic map of the area where the wastewater is to be land applied with no greater than ten foot contours presented at a minimum size of 24 inches by 24 inches.	
Describe alternative application methods based on the following priority rating: (1) connection to a municipal/public sewer system, (2) connection to a conventional subsurface disposal system as regulated by the Division of Groundwater Protection, and/or (3) land application.	
<b>For Drip Dispersal Systems Only: Unless otherwise determined by the Department, sewage treatment effluent wells, i.e. large capacity treatment/drip dispersal systems after approval of the SOP Application, will be issued an UIC tracking number and will be authorized as Permit by Rule per UIC Rule 1200-4-6-.14(2) and upon issue of a State Operating Permit and Sewage System Construction Approval by the Department. Describe the following:</b>	
The area of review (AOR) for each Drip Dispersal System shall, unless otherwise specified by the Department, consist of the area lying within a one mile radius or an area defined by using calculations under 1200-4-6-.09 of the Drip Dispersal System site or facility, and shall include, but not be limited to general surface geographic features, general subsurface geology, and general demographic and cultural features within the area. Attach to this part of the application a general characterization of the AOR, including the following: (This can be in narrative form)	
A general description of all past and present groundwater uses as well as the general groundwater flow direction and general water quality.	



A general description of the population and cultural development within the AOR, i.e. agricultural, commercial, residential or mixed.
Nature of injected fluid to include physical, chemical, biological or radiological characteristics.
If groundwater is used for drinking water within the area of review, then identify and locate on a topographic map all groundwater withdrawal points within the AOR, which supply public or private drinking water systems. Or supply map showing general location of publicly supplied water for the area (this can be obtained from the water provider)
If the proposed system is located within a wellhead protection area or source water protection area designated by Rule 1200-5-1-.34, show the boundary of the protection area on the facility site plan.
Description of system, Volume of injected fluid in gallons per day based upon design flow, including any monitoring wells
Nature and type of system, including installed dimensions of wells and construction materials

<b>Pump and Haul:</b>	<input type="checkbox"/> N/A
Reason system cannot be served by public sewer: <b>Construction site. No connection to public sewer available.</b>	
Distance to the nearest manhole where public sewer service is available: <b>unknown</b>	
When sewer service will be available: <b>N/A. Temporary construction project.</b>	
Volume of holding tank: 5 total: 1,000 gal (1), 440 gal (1), and 300 gal (3)gal.	
Tennessee licensed septage hauler (attach copy of agreement): <b>Cathey's Portable Toilets and Septic Pumping</b>	
Facility accepting the septage (attach copy of acceptance letter): <b>City of McMinnville Waste Water Treatment Facility</b>	
Latitude and Longitude (in decimal degrees) of approved manhole for discharge of septage: <b>N/A</b>	
Describe methods to prevent and respond to any bypass of treatment or discharges (i.e., power failures, equipment failures, heavy rains, etc.): <b>N/A. Sanitary waste water will go directly into holding tanks.</b>	

<b>Holding Ponds (for non-domestic wastewater only):</b>	<input checked="" type="checkbox"/> N/A
Pond use: <input type="checkbox"/> Recirculation <input type="checkbox"/> Sedimentation <input type="checkbox"/> Cooling <input type="checkbox"/> Other (describe):	
Describe pond use and operation:	
If the pond(s) are existing pond(s), what was the previous use?	
Have you prepared a plan to dispose of rainfall in excess of evaporation? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If so, describe disposal plan:	
Is the pond ever dewatered? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If so, describe the purpose for dewatering and procedures for disposal of wastewater and/or sludge:	
Is(are) the pond(s) aerated? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Volume of pond(s):	gal. Dimensions:

Is the pond lined (Note if this is a new pond system it must be lined for SOP coverage. Otherwise, you must apply for an Underground Injection Control permit.)? ☐ Yes ☐ No

Describe the liner material (if soil liner is used give the compaction specifications):

Is there an emergency overflow structure? ☐ Yes ☐ No

*If so, provide a design drawing of structure.*

Are monitoring wells or lysimeters installed near or around the pond(s)? ☐ Yes ☐ No

*If so, provide location information and describe monitoring protocols (attach additional sheets as necessary):*

### Mobile Wash Operations:

☒ N/A

☐ Individual Operator

☐ Fleet Operation Operator

**Indicate the type of equipment, vehicle, or structure to be washed during normal operations (check all that apply):**

☐ Cars

☐ Parking Lot(s):                      sq. ft.

☐ Trucks

☐ Windows:                      sq. ft.

☐ Trailers (Interior washing of dump-trailers, or tanks, is prohibited.)

☐ Structures (describe):

☐ Other (describe):

**Wash operations take place at (check all that apply):**

☐ Car sales lot(s)

☐ Public parking lot(s)

☐ Private industry lot(s)

☐ Private property(ies)

☐ County(ies), list:

☐ Statewide

**Wash equipment description:**

☐ Truck mounted

☐ Trailer mounted

☐ Rinse tank size(s) (gal.):

☐ Mixed tanks size(s) (gal.):

☐ Collection tank size(s) (gal.):

Number of tanks per vehicle:

Pressure washer:                      psi (rated)

Pressure washer: ☐ gas powered ☐

gpm (rated)

electric

Vacuum system manufacturer/model:

Vacuum system capacity:                      inches Hg

Describe any other method or system used to contain and collect wastewater:

List the public sewer system where you are permitted or have written permission to discharge waste wash water (include a copy of the permit or permission letter):

Are chemicals pre-mixed, prior to arriving at wash location? ☐ Yes ☐ No

**Describe all soaps, detergents, or other chemicals used in the wash operation (attach additional sheets as necessary):**

Chemical name:

Manufacturer:

Primary CAS No. or Product No.




Permit Number: SOP-\_\_\_\_\_

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**OFFICIAL STATE USE ONLY**

Received Date	Permit Number <b>SOP</b>	Field Office	Reviewer
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## APPLICATION FOR A STATE OPERATION PERMIT (SOP)

### INSTRUCTIONS

Purpose of this form A completed SOP application must be submitted to obtain SOP coverage. This permit is required to operate a sewage, industrial waste or other waste collection and/or treatment system that does not have a point source discharge to any surface or subsurface waters. This form must be submitted at least 180 days before starting any new activity, before an existing permit expires, or when renewing a permit.

Complete the form Type or print clearly, using black or blue ink; not markers or pencil. Answer each item or enter "N/A," for not applicable. If you need additional space, attach a separate piece of paper to the SOP application. Applicants may be required to submit engineering reports, plans and specifications. Contact the division for the applicable items, or visit the Division of Water Pollution Control world wide web site at: <http://www.tn.gov/environment/wpc> for more information. **The application will be considered incomplete without supplying all of the required information, Engineering Reports, and an original signature.**

Permittee Identification/Facility Identification Describe and locate the project, use the legal or official name of the facility or site. Provide the latitude and longitude (expressed in decimal degrees) of the center of the site, which can be located on USGS quadrangle maps. The quadrangle maps can be obtained at 1-800-USA-MAPS, or at the Census Bureau world wide web site: <http://www.census.gov/cgi-bin/gazetteer>. Attach a copy of a portion of a 7.5 minute quad map, showing location of site, with boundaries at least one mile outside the site boundaries. If business is mobile give the owner of operations' home, or business office address, and list all current areas of operation by city and county.

Wastewater Collection System These types of systems require engineering reports, refer to the website (<http://www.tn.gov/environment/wpc/>) for more information.

Land Application Treatment System These types of systems require engineering reports, refer to the website (<http://www.tn.gov/environment/wpc/>) for more information. Public access to the treatment area must be restricted, if disinfection is not part of the treatment. Applicants completing this section of the application must also complete the Wastewater Collection System section.

Pump and Haul These types of systems may require engineering reports, refer to the website (<http://www.tn.gov/environment/wpc/>) for more information.

Holding Ponds Given that annual rainfall onto open ponds exceeds annual evaporation (in Tennessee), the permittee must develop a written plan (to be retained on site and be available to the division upon request) that addresses how excess rainfall will be disposed of in compliance with the no discharge requirement of this permit. Treatment ponds are not to be used for stormwater treatment or storage. All new and existing point source industrial stormwater discharges associated with industrial activity require coverage under the Tennessee industrial stormwater multi-sector general permit TMSP, refer to the website (<http://www.tn.gov/environment/permits/strmh2o.shtml>) for more information. Describe the system for re-routing surface runoff away from ponds in the rainfall disposal plan.

Mobile Wash Operations Indicate whether the operation is run by an individual or a corporation with a fleet of vehicles equipped to wash and collect waste waters. If a corporation, indicate the home office as the "Official Contact". Indicate if operations take place at specific sites and list those counties that apply. Note that this permit covers operations for all of Tennessee. Operations indicated as "statewide" generally apply as a fleet type operation and each office location shall be individually permitted. Equipment may be truck or trailer-mounted, or both, indicate all that applies. Soaps, detergents, and other chemicals used should be non-toxic and biodegradable. All "chemically enhanced" (soaps, detergents, and other chemicals) wastewater must be collected for proper disposal. If no chemically enhanced washwaters are used, clear-

wash waters may travel by sheet flow to a gravel or grassy area where there is no opportunity to enter waters of the state. There should be no discharge to a storm water inlet, ditch, conveyance, stream, etc. If you are unsure of your wash area drainage, contact the area Environmental Field Office (EFO) prior to setting up your wash operation.

**Fees** There is no application fee for this permit. An annual maintenance fee is required and you will be invoiced at a later date.

**Submitting the form and obtaining more information** Note that this form must be signed by the chief executive officer, owner, or highest ranking elected official. For more information, contact your local EFO at the toll-free number 1-888-891-8332 (TDEC). Submit three complete applications (keep a copy for your records) to the appropriate EFO for the county(ies) where the facility is located, addressed to **Attention: WPC, Permit Section Manager**.

EFO	Street Address	Zip Code	EFO	Street Address	Zip Code
Memphis	2510 Mt. Moriah Road STE E-645	38115-1520	Cookeville	1221 South Willow Ave.	38506
Jackson	1625 Hollywood Dr	38305-4316	Chattanooga	540 McCallie Avenue STE 550	37402-2013
Nashville	711 R S Gass Boulevard	37243	Knoxville	3711 Middlebrook Pike	37921
Columbia	2484 Park Plus Drive	38401	Johnson City	2305 Silverdale Road	37601

Upon receipt of the required items, the division conducts a review of the material, and the applicant is notified of any deficiencies. When all the deficiencies have been corrected, the division makes a determination of whether to publish a draft permit. When a draft permit is generated, a public notice is issued and published in a local newspaper. The draft permit is then reviewed by the applicant, and division field staff. The general public also has an opportunity to review the permit. Based on public response, a public hearing may be held. After considering public comments and a final review, the permit may be issued. The entire process normally takes from five (5) to nine (9) months. Permits are normally valid for five (5) years, except those for pump and haul systems, which are generally valid for one (1) year.

The division has the right to inspect a facility when deemed necessary. In addition, the division has the right to revoke or suspend any permit for violation of permit conditions or any other provisions of the Tennessee Water Quality Control Act and other water pollution control rules.

The division is responsible for regulating any activity, which involves a potential discharge in order to protect waters of the State from pollution and to maintain the highest possible standards in water quality.





STATE OF TENNESSEE  
DEPARTMENT OF ENVIRONMENT AND CONSERVATION  
DIVISION OF GROUND WATER PROTECTION  
PERMIT FOR SEPTIC TANK PUMPING CONTRACTOR

PERMIT NUMBER: 442

CATHEY'S PORTABLE TOILETS & SEPTIC PUMPING  
471 SHORT MOUNTAIN ROAD  
McMINNVILLE, TN 37110

IS HEREBY GRANTED PERMISSION TO OPERATE

By The Tennessee Department of Environment And Conservation In  
Accordance With The Provision Of The Regulations To Govern  
Subsurface Sewage Disposal Systems Rule 1200-1-6-.18 As  
Authorized By Tennessee Code Annotated 68-221-403(a)(7).

A handwritten signature in black ink, appearing to read "Bill [unclear]", written over a horizontal line.

Director

This permit is good until suspended or revoked by the Tennessee  
Department of Environment and Conservation and automatically  
becomes invalid on January 1, 2013. This permit is not  
transferable or assignable.


**AUTHORIZATION TO DISCHARGE  
UNDER THE  
SEWER USE ORDINANCE  
CITY OF MCMINNVILLE**

**Permit Number:** ST-0205-09  
**Effective date:** November 1, 2011  
**Expiration date:** November 1, 2012

Cathey's Portable Toilets, classified as a Domestic Holding Tank Waste Hauler, is authorized to discharge into the Wastewater Treatment Facility of the City of McMinnville in accordance with the General Pretreatment Regulations and the Sewer Use Ordinance.

This permit is conditional upon conformance to the above mentioned Code and all other requirements and limitations set forth in parts hereof.

Signed this 8<sup>th</sup> day of November 20 11.

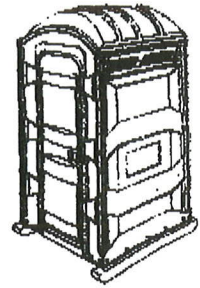
  
Tony Myers, Plant Manager  
Wastewater Treatment Plant

cc: David Rutherford, City Administrator

**COPY**

# Cathey's Portable Toilets

471 Short Mtn. Rd.  
McMinnville, TN 37110  
Ph: 931-668-4442  
Cell: 931-607-2094  
Cell: 931-6273-6512



TO:

DELIVERED TO:

CUSTOMER NUMBER - NAME - ADDRESS - PHONE				SITE NAME - ADDRESS - PHONE			
Bauer Foundation 13203 Byrd Legg Dr. Odessa, Fla 33556				Centert Hill Dam			
DATE ORDERED 3-1-12	DATE WANTED	ORDERED BY Jim Mancuso	TERMS 3 year	P.O. NUMBER		DATE CANCELLED	
JOB NUMBER 07373		CANCELLED BY					
SPECIAL INSTRUCTIONS							
I hereby acknowledge receipt of equipment subject to the stated terms of this agreement which I have read.				DATE START BILLING	DATE END BILLING	ENTERED BY Shale Cathey SAC	
<input checked="" type="checkbox"/> If other than Customer, signer represents that he is agent of and authorized to sign for Customer.							
UNIT QUANTITY	UNIT DESCRIPTION	SERVICE CODE	UNIT VALUE	RATE PER UNIT			
	See Attached Exhibit "A"						
	Jim Mancuso G.C.						
	2/10/12						
DRIVER USE ONLY							
DELIVERY INFO				PICK-UP INFO			
DATE		DATE		UNIT #(S)			
UNIT #(S)		DRIVER		DAMAGES:			
DRIVER		DATE		PARTIAL PICK-UP			
CLEAN ON:		UNIT #(S)					
I accept/decline the damage waiver as provided on the reverse side and agree to pay the above described additional charges therefore.				IF DECLINED, PLEASE INITIAL			
				THIS IS YOUR CONTRACT,			

Thank you for ordering from Cathey's. You will find that in addition to providing the most modern and sanitary temporary rest room and sink facilities available, Cathey's also provides the most efficient service using specialized equipment and scientific techniques.

Portable restrooms and/or sinks have been delivered to the site address listed above in accordance with our standard terms and conditions.

Please do not hesitate to call on us whenever we can be of service.



**Cathey's  
Portable Toilets  
471 Short Mountain Rd.  
McMinnville, TN 37110**

**Boat & RV Pumping  
Serving Warren & Surrounding Counties  
Sacathey@blomand.net  
Office & FAX: 931-668-4442 Cell: 273-6512 607-2094**

**Raising The Standard One Customer At A Time**

**Quote - Exhibit A "**  
**4 Week Billing Cycle**

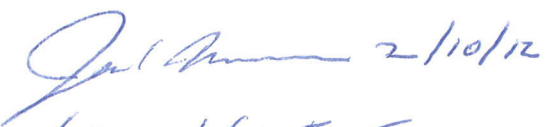
2-9-12

Bauer  
Centerhill Dam Project

Unit Rental Fees with once a week Service \$ 85.00  
Unit Rental Fees with twice a week Service \$ 190.00  
300 gal. Holding Tank Rental \$ 145.00  
300 gal. Pumping Fee \$ 150.00  
440 gal. Holding Tank Rental \$ 165.00  
440 gal. Pumping Fee \$ 225.00  
1,000 gal. Holding Tank Rental \$ 425.00  
1,000 gal. Pumping Fee \$ 500.00  
1,500 gal. Holding Tank Rental \$ 600.00  
1,500 gal. Pumping Fee \$ 750.00

For The Best Service & Most Sanitary You Can Count On CATHEY'S

**Thank You  
Owners & Operators**

  
General Constanton  
Bauer Foundation Corp


**AUTHORIZATION TO DISCHARGE  
UNDER THE  
SEWER USE ORDINANCE  
CITY OF MCMINNVILLE**

**Permit Number:** ST-0205-09  
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Signed this 8<sup>th</sup> day of November 20 11.

  
Tony Myers, Plant Manager  
Wastewater Treatment Plant

cc: David Rutherford, City Administrator

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